

**AMENDMENT TRANSMITTAL LETTER**Docket No.  
3655-0284PUS1Application No.  
10/002,819-Conf. #6862Filing Date  
November 15, 2001Examiner  
G. GauthierArt Unit  
2645

Applicant(s): James MACOR

Invention: WIRELESS SECURITY AND ACCESS DEVICE

**MS Amendment**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Transmitted herewith is an amendment in the above-identified application.

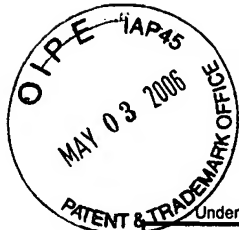
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	26	- 20 =	6	x 50	300
Independent Claims	4	- 4 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): <i>Petition 1 Month Extension of Time</i>					120
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>420</b>

☒ Large Entity☐ Small Entity☐ No additional fee is required for this amendment.☒ Please charge Deposit Account No. 50-1602 in the amount of \$ 420.  
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-1602  
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  
Scott L. Lowe

Attorney Reg. No.: 41,458

Dated: May 3, 2006BIRCH, STEWART, KOLASCH & BIRCH, LLP  
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Suite 100 East  
P.O. Box 747  
Falls Church, Virginia 22040-0747  
(703) 205-8000



<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
		Application Number	10/002,819-Conf. #6862
		Filing Date	November 15, 2001
		First Named Inventor	James MACOR
		Examiner Name	G. Gauthier
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2645
<b>TOTAL AMOUNT OF PAYMENT</b>		Attorney Docket No.	3655-0284PUS1
(\$)		420.00	

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>50-1602</u> Deposit Account Name: <u>AVAYA INC.</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>
<b>Fee Description</b>							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		<b>Multiple Dependent Claims</b>		
26	- 20 = 6	x 50 =	300		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>				
4	- 4 =	x					
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
	- 100 =	/50	(round up to a whole number) x				
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<b>Fees Paid (\$)</b>	
Other (e.g., late filing surcharge): 1251 Extension for response within first month						120.00	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	41,458
Name (Print/Type)	Scott L. Lowe	Telephone	(703) 205-8000
		Date	May 3, 2006